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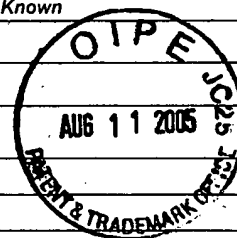
# FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$) 1,520.00

Complete if Known

Application Number	10/810,852
Filing Date	March 29, 2004
First Named Inventor	Kozo OKUDA et al.
Examiner Name	Walter F. Briney III
Art Unit	2644
Attorney Docket No.	033240.0091


**METHOD OF PAYMENT** (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_

☒ Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

Under 37 CFR 1.16 and 1.17  
**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**
**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**
**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>		
<b>Extra Claims</b>		
<b>Fee(\$)</b>		
<b>Fee Paid (\$)</b>		
<b>Multiple Dependent Claims</b>		
<b>Fee (\$)</b>		
<b>Fee Paid (\$)</b>		

**Total Claims** \_\_\_\_\_ **Extra Claims** \_\_\_\_\_ **Fee(\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

\_\_\_\_\_ -20 or HP= \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** \_\_\_\_\_ **Extra Claims** \_\_\_\_\_ **Fee(\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

\_\_\_\_\_ - 3 or HP= \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets** \_\_\_\_\_ **Extra Sheets** \_\_\_\_\_ **Number of each additional 50 or fraction thereof** \_\_\_\_\_ **Fee (\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Notice of Appeal \$500.00

Other (e.g., late filing surcharge): Petitioner for Extension of Time – Three Months \$1020.00

**Fees Paid (\$)**  
total \$1,520.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	32,263	Telephone	202-263-4300
Name (Print/Type)	Michael A. Makuch			Date	August 11, 2005

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Patent

Attorney Docket :  
033240M0091

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:	)	<b>Conf. No. 9125</b>
	)	
<b>Kozo Okuda, et al.</b>	)	
	)	
Serial No.: 10/810,852	)	Group Art Unit: 2644
	)	
Filed: March 29, 2004	)	Examiner: W. F. Briney III

For : SPEECH COMMUNICATION APPARATUS

**FORMAL DRAWING TRANSMITTAL LETTER**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

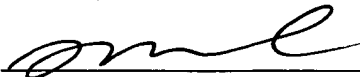
Applicants include herewith two sheets of formal drawings with a change to each of Figures 1 and 2. Specifically, each of Figures 1 and 2 has been designated with a Prior Art heading. Please use the correct formal drawing sheet to replace the corresponding drawing sheet filed March 29, 2004.

With this filing, all formal drawing requirements in this case are considered satisfied.

Respectfully submitted,

SMITH, GAMBRELL & RUSSELL, LLP

By :

  
\_\_\_\_\_  
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Date: August 11, 2005